

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)  
**FOLLOW THE NORTH STAR FUND**

**A.**

Full Name (Last, First, Middle Initial)  
**BENNET FOR COLORADO**

Mailing Address **1900 GRANT STREET SUITE 1170**

City **DENVER** State **CO** Zip Code **80203**

Purpose of Disbursement  
 Contribution

Candidate Name  
**MICHAEL F BENNET**

Category/  
 Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: **CO** District: **00**

**Transaction ID: SB23.5754**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**2500.00**

**B.**

Full Name (Last, First, Middle Initial)  
**BENNET FOR COLORADO**

Mailing Address **1900 GRANT STREET SUITE 1170**

City **DENVER** State **CO** Zip Code **80203**

Purpose of Disbursement  
 Contribution

Candidate Name  
**MICHAEL F BENNET**

Category/  
 Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: **CO** District: **00**

**Transaction ID: SB23.5851**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**2500.00**

**C.**

Full Name (Last, First, Middle Initial)  
**CHARLIE MELANCON CAMPAIGN COMMITTEE INC**

Mailing Address **PO Box 549**  
**PO BOX 549**

City **Napoleonville** State **LA** Zip Code **70390**

Purpose of Disbursement  
 Contribution

Candidate Name  
**CHARLES MELANCON**

Category/  
 Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: **LA** District: **00**

**Transaction ID: SB23.5750**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**2500.00**

**SUBTOTAL** of Disbursements This Page (optional) .....

**7500.00**

**TOTAL** This Period (last page this line number only) .....